



KENTUCKY DEPARTMENT OF AGRICULTURE

A Consumer Protection And Service Agency • Richie Farmer, Commissioner

Office of the State Veterinarian, Robert C. Stout, DVM • [www.kyagr.com](http://www.kyagr.com)

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**APPLICATION FOR AN APPROVED HORSE SALE**

This is to request approval of \_\_\_\_\_ Horse Sale,

located at \_\_\_\_\_  
to be approved for selling horses, and other equidae, at public auction in accordance with 302 KAR 20:065. In applying for this approval, I agree to the following:

1. Furnish a schedule of sale days to the State Veterinarian's Office, and to maintain veterinary inspection on sale days.
2. Maintain on file for twelve (12) months complete records of origin and destination of each animal going through the market. A driver's license, or other valid identification, will be used to obtain complete addresses of both the buyer and seller of each animal. These records will be made available to state livestock inspectors at their request.
3. Place in visible locations, throughout the market and sale area, notices which make it clear that animals are being sold without proof of being negative to Equine Infectious Anemia.
4. Take full responsibility to insure that all eligible animals are tested for Equine Infectious Anemia by the market's veterinarian.
5. Maintain a list of bonafide slaughter buyers, and permit no animal which is consigned for slaughter to be removed from the market except to travel to a slaughtering establishment approved by the State or Federal Department of Agriculture.
6. Maintain well constructed pens and handling facilities that are clean, well lighted, and in good repair.
7. Clean and disinfect animal handling facilities as deemed necessary by the Department of Agriculture to prevent the spread of infectious disease.

I have been explained each of the above statements and agree to abide by them.

\_\_\_\_\_  
Name, Address, and Phone Number of Market (Please Print or Type)

\_\_\_\_\_  
Market Owner/Manager's Signature and Date

\_\_\_\_\_  
Sale Days

\_\_\_\_\_  
Equine Branch Manager Signature and Date

\_\_\_\_\_  
State Veterinarian's Approval and Date